

MULTIPLE DEPENDENT CLAIM FEE CALCULATION SHEET (FOR USE WITH FORM PTO-816)							SERIAL NO. 9/782520	FILING DATE			
APPLICANT(S)											
CLAIMS											
	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT						
	IND.	DEF.	IND.	DEF.	IND.	DEF.		IND.	DEF.	IND.	DEF.
1							51				
2							52				
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44							94				
45							95				
46							96				
47							97				
48							98				
49							99				
50							100				
TOTAL IND.	4						TOTAL IND.				
TOTAL DEF.	36						TOTAL DEF.				
TOTAL CLAIMS	40						TOTAL CLAIMS				

PTO-1560 (2-78)

*MAY BE USED FOR ADDITIONAL CLAIMS OR AMENDMENTS

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